

BUSINESS NAME:

801 SW 174th Street Normandy Park, WA 98166 Phone: (206) 248-7603 Fax: (206) 439-8674

TAX RETURN INSTRUCTIONS:

1. Tax return must be completed and returned with payment to the City of Normandy Park.

File original with City. Keep a copy for your records.

2. Applicable penalities must be included with payment.

GAMBLING TAX RETURN

For Quarter Ending:

March 31

June 30

BUSINESS ACTIVITY CHANGES:

□ September 30
□ December 31

DATE DUE: Payment and tax return are due on the last day of the month following the end of the quarter.

ENCLOSURES REQUIRED: A copy of your Washington State Gambling Commission "Quarterly Report" must be enclosed with this tax return.

			□ Activities discontinued as of □ Business ownership change: New Owner: □ Address Change:		
Activity	Cross Bessints	(-) Allowed Deductions	(=) Taxable Revenue	(x) Tax Rate	
Activity Punchboard	Gross Receipts	NONE ALLOWED	Revenue	5%	(=) TAX
Pulltabs		NONE ALLOWED		5%	
	CHARITABLE & NO	NPROFIT ORGANIZA		•	
Activity	Gross Receipts	(-) Allowed Deductions	(=) Taxable Revenue	(x) Tax Rate	(=) TAX
Punchboard	C. COO NOCCIPIO	Doddonono	TO TO TIMO	10%	(-)160
Pulltabs				10%	
Bingo				5%	
Raffle				5%	
Amusement Games				2%	
Cardgames		NONE ALLOWED		20%	
Punchboard				10%	
Pulltabs				10%	
				Total Tax	
		xemption amounts on		Penalty	
Bona Fide Charitable & Nonprofit Organizations			_	Total Paid Check #	
Make checks	s payable to the City o	of Normandy Park.		Check #	
		information reported on this	form is true and cor	rrect to the best of my	knowledge.
	Signature		Date		Print Name